The Paradox of Prevention: Authoritarian Past and Liberal Democracy in Times of Crisis

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Abstract

In this paper, I analyze the link between democracy and lockdown policies during times of crisis. In using multilevel regression models, I show that countries with a past of authoritarian government are more likely to impose stringent restrictions on citizens' liberties compared to countries with a democratic legacy during the COVID-19 pandemic. I explain this finding with a transference of policy practices over time. Furthermore, I compare the development of democracy before and after the "Spanish Flu" of 1918-1920, in using interrupted time series models. My findings suggest that it is unlikely that this historic pandemic contributed significantly to the decline of democracy. The results of this research indicate that past rather than present regime forms explains lockdown stringency. In addition, anti-pandemic policies do not seem to cause a decline of democracy but rather reinforce pre-existing trends in regime development.

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1 Introduction

In times of crisis, such as the COVID-19 pandemic, national governments lead the policy response while parliamentary control is temporarily weakened. During the COVID-19 pandemic decision-makers in many countries have imposed restrictions on individual freedoms to protect the public's health and to save lives, for example through shelter-in-place orders. Some scholars have emphasized that these swift policy responses have strengthened support for governments and democracy in general (Blais, Bol, Giani & Loewen 2020, De Vries, Bakker, Hobolt & Arceneaux 2020). Others have pointed out that the lock-down measures increase support for autocratic styles of government and could pose a danger to democracy (Schwartz 2012, Amat, Arenas, Falcó-Gimeno & Muñoz 2020, Cepaluni, Dorsch & Branyiczki 2020, Flinders 2020).

In this article, I assess the link between authoritarian government and anti-pandemic policies. I pose the question whether a past of autocratic government results in more restrictive lock-down measures against the COVID-19 pandemic. Furthermore, I analyze whether the policy measures that restrict individual liberties during a pandemic contribute to a decline of democracy.

To assess these questions, I pursue the following research strategy. Firstly, I use multilevel regression models to estimate if the presence of an authoritarian government between 1850 and 1945, and/or between 1945 and 1990, resulted in more restrictions of individual liberties during the COVID-19 pandemic of 2020, compared to countries with a history of liberal democracy. Secondly, I employ interrupted time-series analysis to explore whether a period of democratic decline followed on the global pandemic of 1918-1920, which is known as the "Spanish Flu".

My results suggest that in countries with a past of authoritarian rule, governments are more likely to impose restrictions on individual freedoms. Against the background of the COVID-19 pandemic, an autocratic past comes along with more stringent lock-down policies, compared to countries with a rather constant level of liberal democracy. Contrariwise, the current degree of democracy does not show a clear relation to the stringency of the lockdown. I interpret this finding as an indication for a historical transference of policy practices and styles of governance, in a way that it similar to the passing down of political beliefs over time. Furthermore, my analysis does not provide strong evidence that a pandemic causes a decline of democracy. Although democracy dwindled during the years following the "Spanish Flu", it is unlikely that this dynamic is strongly related to the policies

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counteracting this historic epidemic. If at all, historic anti-pandemic policies reinforced existing trends towards the decline of democracy.

2 Theoretical Priors

Historical examples show that public health policies dealing with pandemics can take the form of heavy handed policing. For example, during the 1884 Cholera epidemic in the Italian city of Naples, public health officials cracked down on the population. "The city sent teams of people who would now be termed health care workers and disinfection squads, but they conducted themselves almost like an army in enemy territory. Making a great show of force, they arrived at tenements with weapons drawn, sometimes at night, and ordered distraught tenants to surrender critically ill relatives to undergo isolation and treatment at a distant hospital that was rumoured to be a death house" (Snowden 2019, 251)(Snowden 2002). Another example is the "Spanish Flu" of 1918-1920. To deal with this pandemic, governments around the world imposed lock-down measures on the population, which restricted economic and civic liberties of individuals (Barry 2005).

Governments' responses to the COVID-19 pandemic vary between countries, notably concerning how these policies restrict individual liberties (Spadaro 2020). To understand why decision-makers decided to impose a harsh lock-down with significant restrictions of freedoms as part of their policy response to COVID-19, I resort to the literature dealing with the historical study of politics. Proponents of historical institutionalism have pointed out that historic policy decisions impact on present reform options and structure of political conflicts (Pierson 2000, Thelen 2014). In addition, scholars have shown that political attitudes persist over time. Preferences that have dominated in the past tend to last and are passed on over generations. A prominent example for this insight is the link between slavery and political attitudes in the South of the U.S. (Acharya, Blackwell & Sen 2016, Acharya, Blackwell & Sen 2018).

I infer from this research that it is plausible to hypothesize that an authoritarian past of government explains why decision-makers impose policies restricting individual freedoms during COVID-19. The mechanism underlying this hypothesis is that not only political beliefs but also styles of government and policy practices are passed down over time. Modern public health legislation originated in the 19th century and developed until the middle of the 20th century. Simi-

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lar to today's COVID-19 outbreak, these historic policy responses against infectious diseases were likely to be non-pharmaceutical measures because possibilities for medical interventions were limited. In some countries, modern public health legislation originated under authoritarian government (Baldwin 1999, Trein 2018).

Therefore, I contend that decision-makers are more likely to resort to harsher lock-down measures during the COVID-19 pandemic, if they operate against a past of infectious disease governance under autocratic rule. In such a context, political beliefs and administrative practices regarding the response to infectious diseases were shaped in a context of authoritarian government, rather than in an environment of liberal democracy. Consequently, I propose the following hypothesis:

Hypothesis 1*: Countries with a past of authoritarian government are more likely restrict individual freedoms during pandemic.*

Furthermore, crises such as the COVID-19 pandemic can punctuate existing policy subsystems and induce important reforms (Jones, Sulkin & Larsen 2003, Baumgartner, Breunig, Green-Pedersen, Jones, Mortensen, Nuytemans & Walgrave 2009). In other words, they can take the role of focusing events that accelerate policy change (Birkland 1998). Thus, if anti-crisis policies come along with autocratic practices, such as lock-down measures, there is a risk of an authoritarian backlash. Governments will try to keep the controls over individual freedoms during the post-crisis period. Such action could be justified because new abilities to restrict individual freedoms will allow for more efficient government in the future or to restrain political opposition. This logic is plausible because policies restricting individual liberties tend to receive popular support during pandemics as they are efficient in dealing with the policy problem (Schwartz 2012, Amat et al. 2020). It is, however, unlikely that a potential turn to authoritarianism comes along with a spectacular breakdown of democratic government. To the contrary, pandemic policies should contribute to the slow death of democracies "in darkness" (Levitsky & Ziblatt 2018). In such a scenario, governments maintain the control and intrusion into civil liberties and economic freedoms, which they accumulated during the process of managing the pandemic. Thus, I propose the following hypothesis:

Hypothesis 2*: In the years following a pandemic, a decline of democracy becomes more likely.*

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3 Research Design and Data

To operationalize the discussed hypotheses, I pursue a two-step research strategy. First, I analyze the link between authoritarian past and the responses to the COVID-19 pandemic of 2020. Therefore, I conduct a comparative analysis of 136 countries. To operationalize the lock-down policies during the COVID-19 pandemic, I use a newly collected data set that compares countries over time. A group of scholars at the Oxford Blavatnik School of Government conceptualized and assembled the data (Hale, Petherick, Phillips & Webster 2020). To identify the history of authoritarian rule, I use the index on liberal democracy from the *Varieties of Democracy* data set (Coppedge, Gerring, Knutsen, Lindberg, Teprell, Altman, Bernhard, Fish, Glynn, Hicken, Lührmann, Marquardt, McMann, Paxton, Pemstein, Seim, Sigman, Skaaning, Staton, Wilson, Cornell, Gastaldi, Gjerløw, Hindle, Ilchencko, Maxwell, Mechkova, Medzihorsky, von Römer, Sundström, Tzelgov, Wang, Wig & Ziblatt 2020). I create two variables measuring the absence of liberal democracy: one averaging authoritarian government between between 1850 and 1945 and a second one focusing on the period 1945-1990. To analyze the association between lock-down policy and history of authoritarian rule, I use multilevel mixed-effects negative binomial regression models with a clustering of standard errors at the country level. I control for reported cases, reported deaths, today's score of liberal democracy, federalism as well as the sizes of the economy and population.

Second, I analyze how the "Spanish Flu" of 1918-1920 impacted on the development of liberal democracies around the world. To conduct this analysis, I use an interrupted time series model, estimating the differences in trends of liberal democracy based on the *Varieties of Democracy* data set. To assess whether lock-down policies during a pandemic impact on liberal democracy, I compare the level of democracy in the 20 years prior to the end of the pandemic (1920) with the 20 years following the crisis. As I am only interested in variation over time, I use country and unit fixed-effects models (Angrist & Pischke 2008). The online appendix to this paper explains the data set, construction of the variables, and the model choice in more detail.

4 Results

The results of the multilevel models analyzing the link between authoritarian past and the strictness of lock-down measures show that countries scoring higher on the measurements for liberal

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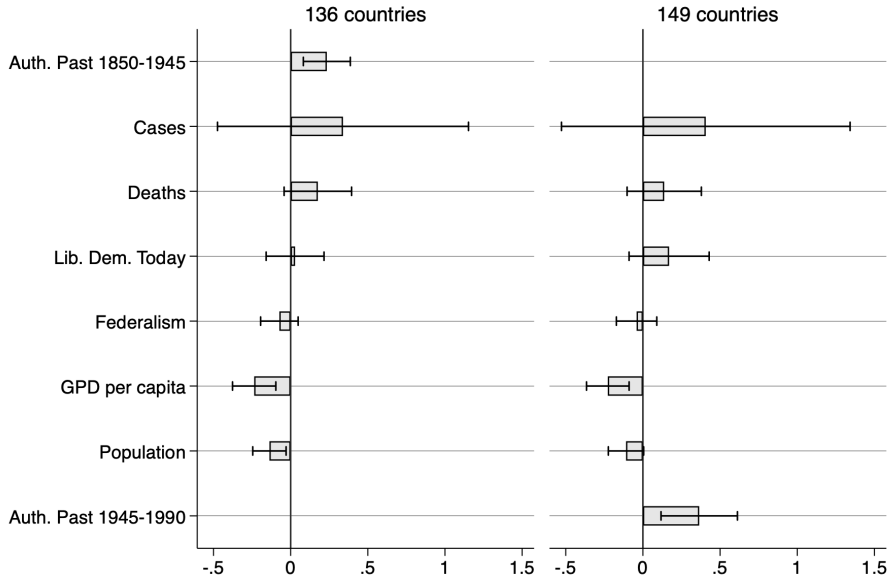
democracy during the periods 1850-1945 and 1945-1990 are less likely to impose lock-downs during the COVID-19 pandemic. In other words, countries with an authoritarian past tend to put in place policies, which are more restrictive on individual freedoms compared to countries that were democracies since a long time. Interestingly, the link between stringency and current level of liberal democracy is much weaker. The models show also that a larger economy results in less restrictive lock-down measures. Furthermore, a higher rate of deaths seems to come along with harsher restrictions of individual freedoms (Figure 1, Appendix). The findings are robust when I use the measure for polyarchy instead of liberal democracy in the *Varieties of Democracy* data-set.

Figure 1: *Authoritarian past and stringency of lock-down measures during the COVID-19 pandemic.*



The second part of the empirical analysis assesses whether the "Spanish Flu" pandemic of 1918-1920 led to a decline in democracy around the world. An interrupted time series model shows that there is a negative trend in the presence of liberal democracy in the twenty years after 1920 compared to the twenty years before that. The effect seems to be especially strong, if I analyze only those 30 countries that score highest on the measure for liberal democracy, in 1920. Nevertheless, if I use a placebo time-series interruption for years prior to the pandemic (1917 and 1910), the results remain very similar. Therefore, the overall decline of democracy in the two decades after 1920 are part of a larger trend towards more authoritarian government, which had already begun earlier. These results remain stable if I control for the trend in liberal democracy in the last five years and the lagged

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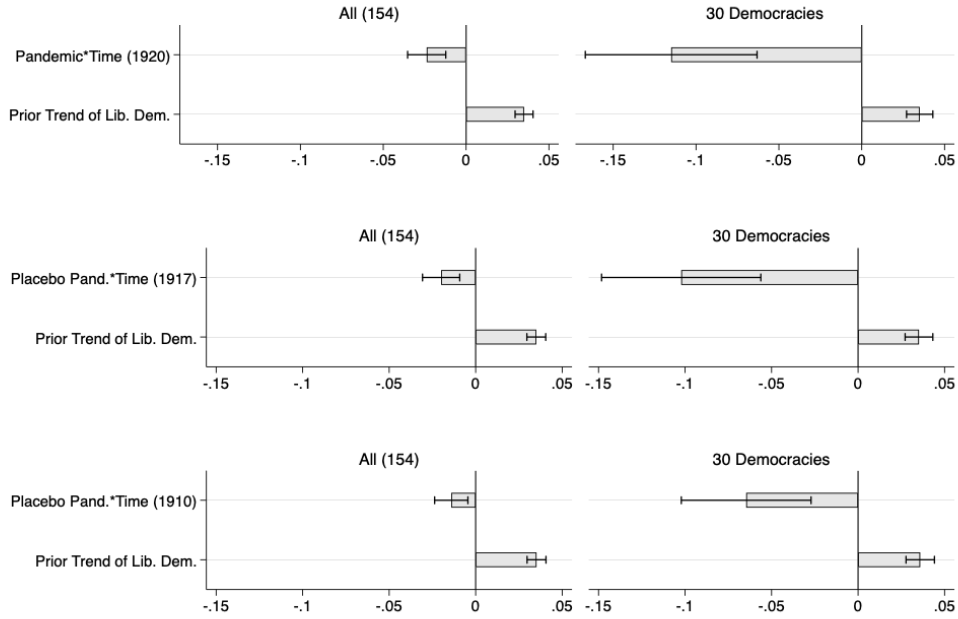
value (t-1) for liberal democracy (Figure 2, Appendix).[1] Again, the findings are robust when I use the measure for polyarchy instead of liberal democracy in the *Varieties of Democracy* data-set.

Figure 2: *Evolution of liberal democracy after the "Spanish Flu" 1918-1920.*



The results of the empirical analysis presented in this paper extend some support to the discussed theoretical priors. The first hypothesis postulates that an authoritarian past increases the likelihood of decision-makers imposing stricter lock-down measures during a pandemic. Evidence from the COVID-19 pandemic shows that this association holds. The second hypothesis proposes that a pandemic reduces the level of liberal democracy, as anti-crisis policies impose restrictions on individual freedoms. My empirical analysis does not support the argument that the "Spanish Flu" pandemic was a turning point in the development of democracies but rather a continuation of previous developments (Doorenspleet 2000).

5 Conclusion

In this paper, I examine how authoritarian rule and liberal democracy are related in times of crisis. Specifically, I put two hypotheses to an empirical test. First, I analyze whether a past of

[1] Country and unit fixed effects model. Lag dependent variable and constituent terms of the interaction effect are not shown. Full models are in the appendix. Results are robust when I use country fixed effects only.

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autocratic government makes it more likely that governments impose lock-down measures on the population. Multilevel regression models comparing over 136 countries suggest that there is an association between the absence of liberal democracy and lock-down policies during the COVID-19 pandemic. Contrariwise, the current level of democracy seems to have limited explanatory power for lockdown stringency. Second, I assess whether anti-crisis measures against a pandemic result in a decline of democracy. In taking the case of the "Spanish Flu" pandemic (1918-1920), I show that democracy declined in the two decades that followed this event, based on interrupted time series models that compare 154 countries. Nevertheless, these results are inconclusive, since placebo tests demonstrate that liberal democracy declined to a similar degree following earlier points in time.

The results of this paper contribute to the literature in showing that not only political beliefs (Acharya, Blackwell & Sen 2016) but also governance and policy practices are passed down over time. Nowadays, decision-makers act on these policy-making traditions when it comes to reacting to a pandemic. Using measures restricting individual freedoms is justified during a pandemic as it helps to tame the public health problem. The critical question is whether these policies turn into permanent limitations for individual liberties. My results do not provide strong support that anti-crisis policies during a pandemic contribute to strengthening authoritarian government.

This paper opens avenues for further research. Specifically, future scholarship can start from the findings in this paper and deepen the analysis of the link between authoritarian government and policies restricting individual freedoms in times of crisis, such as a pandemic. The findings in this article indicate a co-variation between autocratic government and lock-down during a pandemic, yet, the analysis of causal relations needs more work. Researchers could focus on how lock-down measures strengthen the control of government over individual freedoms in the long run, and how anti-crisis policies re-enforce authority of central governments over parliament and regional governments. These questions are important as regulatory and financial decisions taken in times of emergency can have far-reaching consequences.

Furthermore, this article has theoretical implications for the study of democracy. Temporary restrictions of individual liberties are effective measures to counteract the pandemic and to prevent death (Flaxman, Mishra, Gandy, Unwin, Mellan, Coupland, Whittaker, Zhu, Berah, Eaton et al. 2020). Thus, public health crises can be an opportunity for authoritarian governments to create output legitimacy through successful crisis intervention. Paradoxically, governments in demo-

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cratic countries are more likely to impose stringent lock-down policies if they operate against an authoritarian past because they can use the legacy of autocracy for problem-solving during public health crises. This finding must not be misinterpreted as a critique of democracy and in support of authoritarian government. Neither does historical evidence suggest a strong link between pandemic policy and democratic decline. Nevertheless, liberal democracy should not be mashed up with the necessity of a weak state that is unable to protect its citizens (Ansell 2019) in times of crisis.

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Supplementary material for the paper: The Paradox of Prevention: Authoritarian Past and Liberal Democracy in Times of Crisis

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1 Research Design and Data

To operationalize these hypotheses, I pursue a two-step research strategy. First, I analyze the link between authoritarian past and the responses to the COVID-19 pandemic of 2020. Therefore, I conduct a comparative analysis of 136 countries. To operationalize the lock-down policies during the COVID-19 pandemic, I use a newly collected data set that compares countries over time. A group of scholars at the Oxford Blavatnik School of Government conceptualized and assembled the data (Hale, Petherick, Phillips & Webster 2020). I am confident that the data is valid and measures different policies dealing with the COVID-19 pandemic around the world. According to the producers of the data set, over one hundred students and Oxford University staff from different countries participated in the data collection.

The data contains an index capturing the restrictions of individual freedoms through the policies put into place to respond to COVID-19. Specifically, the data contains information on school closing, workplace closing, cancelling of public events, restrictions of gatherings, closure of public transportation, stay-at-home (shelter-in-place) requirements, internal as well as international restrictions of movements, and the presence of health information campaigns. The data set assembles these policies into an indicator of lock-down stringency.[1]

To identify the history of authoritarian rule, I use the index on liberal democracy from the *Varieties of Democracy* data set (Coppedge, Gerring, Knutsen, Lindberg, Teprell, Altman, Bernhard, Fish, Glynn, Hicken, Lührmann, Marquardt, McMann, Paxton, Pemstein, Seim, Sigman, Skaaning,

[1] More details on the construction of the indicators can be found in this document (Hale et al. 2020).

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Staton, Wilson, Cornell, Gastaldi, Gjerløw, Hindle, Ilchencko, Maxwell, Mechkova, Medzihorsky, von Römer, Sundström, Tzelgov, Wang, Wig & Ziblatt 2020). For each country I calculate the mean of its liberal democracy score from 1850-1945, which is the period from the first national public health legislation until the wide-spread introduction of antibiotics, which changed public health policy. In a second variable, I measure liberal democracy between 1945-1990. During this period, many communist-authoritarian governments around the world propagated public health policies as part of their socialist policy program (Baldwin 1999, Trein 2018). I focus on the liberal democracy index as it emphasizes civil rights and limitations imposed on the powers of central governments. Furthermore, I use some control variables that measure potential different explanations for lock-downs. Notably, these are the daily numbers of cases and deaths, autonomy for lower levels of government, population-size, and GDP per capita. The contextual variables take the latest values available in the dataset. Only the GDP measure uses data from 2016 to be able to compare as many countries as possible.

The data varies between countries and over days for the lock-down policy as well as regarding the numbers of cases and deaths. The variables concerning history of authoritarian rule, GDP per capita, federalism, and population size vary between countries (Table 1).[2] To analyze the association between lock-down policy and history of authoritarian rule, I use multilevel mixed-effects negative binomial regression models with a clustering of standard errors at the country level. I choose this model as a negative binomial distribution describes the data better than poisson and normal distributions. I account for all days after January 23, 2020, which is the date when the Chinese government decided to lock down Wuhan and other cities in Hubei province. The data for this version of the paper ends on June 1, 2020. As all independent variables are scaled differently, I normalized them around two standard deviations, which allows for a better comparability of the coefficients (Gelman 2008).

Second, I analyze how the "Spanish Flu" of 1918-1920 impacted on the development of liberal democracies around the world. To conduct this analysis, I use an interrupted time series model, estimating the differences in tends of liberal democracy based on the *Varieties of Democracy* data set. The 1918-1920 pandemic caused an estimated death toll between 20 and 100 million around

[2]The variables in the upper part of the table are for the analysis of the link between authoritarian past on the lock-down. The variables in the lower part of the table are for the analysis of the impact of the pandemic on democracy.

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Table 1: Summary of variables

Variable	Obs.	Mean	Std. Dev.	Min.	Max
Lock-down policy 2020	20,436	47.43901	35.49761	0	100
Auth. Past Mean(1890-1945)	17,697	-.0000137	.4999872	-1.627943	.4851162
Auth. Past Mean(1945-1990)	19,377	-.0000409	.5000126	-1.334071	.478858
Reported Cases	16,331	.0075753	.5212532	-.0845522	11.56701
Reported Deaths	14,988	.0073524	.521292	-.0820562	9.996037
Lib. Dem. 2018	20,411	.000065	.5000122	-.7470328	.8585727
Federalism	20,569	.0000381	.4999969	-.768674	.696322
Population	20,439	-.0000155	.4999548	-.150077	4.247025
GDP p. capita	19,527	.0000108	.4999842	-.4588978	3.026331
Lib. Dem. 1900-1940	5,849	4.62e-10	.5	-.4407482	1.993477
Pandemic	6,073	7.55e-09	.5	-.5532496	.4518012
Time post-Pandemic	6,073	9.87e-10	.5	-.9090637	.8232191
Pandemic*Time post-Pand.	6,073	-4.15e-09	.5	-.4110515	1.086182
Trend Lib. Dem. (last 5 y.)	5,336	-1.29e-10	.5	-6.509419	7.41967
Lib. Dem. (t-1)	5,694	1.58e-10	.5	-.4351196	1.984823

the world (Rosenwald 2020). It is therefore plausible to assume that it impacted on public policies and administrative practices in most countries, independently of the actual case numbers and death rates (Barry 2005).

Interrupted time series models can be used to estimate the impact of public health policy interventions (Campbell & Ross 1968). To assess whether lock-down policies during a pandemic impact on liberal democracy, I compare the level of democracy in the 20 years prior to the end of the pandemic (1920) with the 20 years following the crisis. Therefore I create an intervention variable, i.e., a binary variable, starting in 1920, and a trend (time count) variable, which starts in the same year. Both measures and their interaction effect are the independent variables used to assess the impact of the "Spanish Flu"-intervention on liberal democracy. In addition, I control for the lag of liberal democracy and the trend of the difference in liberal democracy during the last five years (Table 1). As I am only interested in variation over time, I use country and unit fixed-effects models (Angrist & Pischke 2008).

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2 Regression Tables

Table 2: Multilevel regression models (standard errors in parentheses)

	Dependent variable: Stringency of Lockdown Measures				
Auth. Past (1850-1945)	−0.009	0.348***	0.357***	0.361***	0.234***
	(0.037)	(0.053)	(0.052)	(0.051)	(0.078)
Reported Cases		0.325	0.944***		0.339
		(0.405)	(0.203)		(0.415)
Reported Deaths		0.185*		0.676***	0.176
		(0.111)		(0.174)	(0.112)
Auth. Past*Cases			0.729**		
			(0.334)		
Auth. Past*Deaths				0.398	
				(0.255)	
Lib. Dem. Today					0.029
					(0.096)
Federalism					−0.073
					(0.062)
GDP p. capita					−0.236***
					(0.072)
Popluation					−0.138**
					(0.055)
Constant	3.684***	4.050***	4.072***	4.065***	4.056***
	(0.023)	(0.033)	(0.033)	(0.032)	(0.032)
$ln\alpha$	0.936***	−0.001	−0.008	−0.002	0.043
	(0.053)	(0.119)	(0.120)	(0.119)	(0.118)
Constant Country	0.051**	0.128***	0.141***	0.129***	0.107***
	(0.025)	(0.027)	(0.027)	(0.025)	(0.027)
AIC	184973.22	141574.27	141493.49	141566.87	136526.57
BIC	185005	141620	141539	141612	136602
Observations	20727	14213	14213	14213	13702

Note: *p<0.1; **p<0.05; ***p<0.01

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Table 3: Multilevel regression models (standard errors in parentheses)

	Dependent variable: Stringency of Lockdown Measures				
Auth. Past (1945-1990)	0.007	0.364^{***}	0.368^{***}	0.382^{***}	0.365^{***}
	(0.040)	(0.054)	(0.052)	(0.049)	(0.126)
Reported Cases		0.395	0.939^{***}		0.407
		(0.469)	(0.262)		(0.477)
Reported Deaths		0.147		0.835^{***}	0.138
		(0.121)		(0.193)	(0.123)
Auth. Past*Cases			0.623		
			(0.415)		
Auth. Past*Deaths				0.540^{**}	
				(0.239)	
Lib. Dem. Today					0.170
					(0.132)
Federalism					−0.041
					(0.067)
GDP p. capita					-0.228^{***}
					(0.070)
Population					-0.109^{*}
					(0.058)
Constant	3.679^{***}	4.049^{***}	4.072^{***}	4.075^{***}	4.048^{***}
	(0.025)	(0.034)	(0.034)	(0.034)	(0.033)
$ln\alpha$	0.935^{***}	0.002	−0.003	0.001	0.042
	(0.050)	(0.113)	(0.113)	(0.113)	(0.112)
Constant Country	0.070^{**}	0.148^{***}	0.158^{***}	0.151^{***}	0.129^{***}
	(0.030)	(0.036)	(0.036)	(0.034)	(0.035)
[-1.8ex] AIC	202440.57	154558.76	154503.70	154551.42	149512.08
BIC	202473	154605	154550	154597	149588
Observations	22698	15532	15532	15532	15021

Note: *p<0.1; **p<0.05; ***p<0.01

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Table 4: Fixed-effects-models (standard errors in parentheses)

	Dependent variable: Liberal Democracy					
	(All)	(Democr.)	(All)	(Democr.)	(All)	(Democr.)
Trend (after 1920)	0.005	0.031*				
	(0.005)	(0.015)				
Pandemic (1920)	0.012***	0.053***				
	(0.004	(0.022)				
Pand.*Trend (1920)	−0.024***	−0.115***				
	(0.006)	(0.025)				
Prior Trend of Lib. Dem.	0.035***	0.035***	0.035***	0.035***	0.035***	0.036***
	(0.003)	(0.004)	(0.003)	(0.004)	(0.003)	(0.004)
Lib. Dem. t-1	0.945***	0.935***	0.947***	0.941***	0.950***	0.961***
	(0.010)	(0.016)	(0.009)	(0.014)	(0.010)	(0.014
Trend (after 1917)			−0.000	0.005		
			(0.005)	(0.016)		
Placebo Pand. (1917)			0.015***	0.074***		
			(0.004)	(0.018)		
Pand.*Trend (1917)			−0.020***	−0.102***		
			(0.005)	(0.022)		
Trend (after 1910)					0.001	−0.001
					(0.005)	(0.011)
Placebo Pand. (1910)					0.008***	0.042***
					(0.002)	(0.009)
Pand.*Trend (1910)					−0.014***	−0.065***
					(0.005)	(0.018)
Constant	0.002***	0.051***	0.002***	0.046***	0.002***	0.030***
	(0.000)	(0.012)	(0.000)	(0.011)	(0.000)	(0.011)
AIC	−14869.80	−1580.22	−14863.94	−1579.87	−14832.47	−1543.70
BIC	−14836	−1555	−14831	−1554	−14799	−1518
Observations	5764	1260	5764	1260	5764	1260

Note: *p<0.1; **p<0.05; ***p<0.01

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